## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09800607

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE			OTHER THAN	
TC	TAL CLAIMS							RATE	FEE		RATE	FEE
FOR NUMBER FILED					NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS 4 minus 20=					· 24			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS					' /			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter						olumn 2	_	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PAR					T II			•		OR	OTHER	
(Column 1)				(Column 2) (Column 3)			;	SMALL ENTITY			SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***	F CL A114	<u> -</u>		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM			+135=	•	OR	+270=	
								TOTAL DDIT. FEE		ا	TOTAL ADDIT, FEE	
		(Column 1)		(Colui	mn 2)	(Column 3)	. ^L	)		•	A0011.1 EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	***		=		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  BEST AVAILABLE COPY						PY		+135=		OR	+270=	
	DEAL VIALUE IDEA						AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colui		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		<u> -</u>		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		<b>!</b>	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Num	nber Previously Pa	id For" (Total o	r Independ	lent) is the	highest numbe	er found	d in the app	ropriate box	k in co	lumn 1.	

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

ABREAU - 60104

Ellective October 1, 2000												
		CLAIMS AS	S FILED - PART ( (Column 1)		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			44				RA	ΓE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			44 minus 20=		• 24		X\$	9=	2160	OR	X\$18=	
INDEPENDENT CLAIMS			ن		· 1.		X4	0=	40.00	OR	X80=	
MULTIPLE DEPENDENT CLAIM P			RESENT				+13	5=		OR	+270=	
• If	the difference	in column 1 is	less than ze	ess than zero, enter "0" in column 2			TOT	AL	611.00	OR	TOTAL	
	CI	LAIMS AS A (Column 1)	MENDED	- PAR (Colui		010			ENTITY	OR	OTHER SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW NOW	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent		Minus	***	T OL 4114	=	X40	)=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	CLAIM		+13	5=		OR	+270=	
							T( ADDIT.	TAL FEE		OR	TOTAL ADDIT. FEE	
	_	(Column 1)		(Colu		(Column 3)				_		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT			IBER OUSLY	PRESENT EXTRA	RA	ſΈ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	•	Minus	••		=	X\$	9=		OR	X\$18=	
AME	Independent		Minus	***	F CL A114	=	X40	)=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAMOPY  BEST AVAILABLE COPY							+13	5=		OR	+270=	
DEOL / (1)							TO ADDIT.	)TAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	X\$	9=		OR	X\$18=	
	Independent	•	Minus			=	X40	)=		OR	X80=	
L	FIRST PRESE	NTATION OF M	JLTIPLE DEPENDENT CLA		TCLAIM		+13	5-			+270=	
		mn 1 is less than t						)TAL		OR	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												